



ATTORNEY DOCKET NO. 05145.0007U1  
EXPRESS MAIL NO. EL979109307US  
APPLICATION NO. 09/902,976  
Page 1 of 2

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:

**Jayant *et al.***

Application No.: **09/902,976**

Filed: **July 11, 2001**

For: **"VIDEO COMPRESSION USING ADAPTIVE  
SELECTION OF GROUPS OF FRAMES  
ADAPTIVE BIT ALLOCATION, AND  
ADAPTIVE REPLENISHMENT"**

Confirmation No.: **9723**

Group Art Unit: **2613**

Examiner: **Patrick Cathey**

**RESPONSE TO OFFICE ACTION TRANSMITTAL**

MAIL STOP AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450


NEEDLE & ROSENBERG, P.C.  
999 Peachtree Street, Suite 1000  
Atlanta, GA 30309

Sir:

Transmitted herewith are the following in the above-identified application:

- ☒ Response to Office Action  
☒ Fee as calculated below  
☐ No Additional Fee Required  
☐ Corrected Drawings

- ☒ Petition to Extend Time  
☐ Supplemental Declaration  
☐ Terminal Disclaimer  
☒ Other: Return Postcard

CLAIMS AS AMENDED								
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	RATE		ADDITIONAL FEE	
Total Claims	9		20		0	X \$50.00		\$0.00
Independent Claims	2		5		0	X \$200.00		\$0.00
<input type="checkbox"/> First Presentation of a Multiple Dependent Claim						+ \$360.00		\$0.00
EXTENSION FEE	1 <sup>st</sup> Month \$120 <input type="checkbox"/>	2 <sup>nd</sup> Month \$450 <input type="checkbox"/>	3 <sup>rd</sup> Month \$1,020 <input checked="" type="checkbox"/>	4 <sup>th</sup> Month \$1,590 <input type="checkbox"/>	5 <sup>th</sup> Month \$2,160 <input type="checkbox"/>		\$1,020.00	
<input checked="" type="checkbox"/> Reduction by ½ for filing by SMALL ENTITY (Note 37 C.F.R. §1.9, §1.27, §1.28) -								- \$510.00
<b>Total Fee Due</b>								<b>\$510.00</b>

Payment:

- ☐ A check in the amount of \$\_\_\_\_\_ is enclosed.
- ☒ Payment by credit card in the amount of **\$510.00** for the fees designated above.  
(Form PTO-2038 enclosed).  
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.
- ☐ The Commissioner is authorized to charge our Deposit Account No. 14-0629 in the amount of \$\_\_\_\_\_ to cover the above-listed additional fees. A duplicate copy of this transmittal is enclosed.
- ☒ In the event of an overpayment or improper payment of a required fee, the Commissioner is authorized to charge or credit our Deposit Account No. 14-0629 as required to correct the error.

Respectfully submitted,

NEEDLE & ROSENBERG, P.C.

  
Dawn V. Stephens, Registration No. 44,355

NEEDLE & ROSENBERG, P.C.

Customer Number 23859

(678) 420-9300 (Telephone)

(678) 420-9301 (Facsimile)